

**191—37.24(514D) Filing and approval of policies and certificates and premium rates.**

**37.24(1) Definition.** For the purposes of this rule:

“Type” means one of the following: an individual policy, a group policy, an individual Medicare Select policy, or a group Medicare Select policy.

**37.24(2) Form filing and approval required.** An issuer shall not deliver or issue for delivery a policy or certificate to a resident of this state unless the SMSBP policy form or certificate form has been filed pursuant to rule 191—20.1(505,509,514A,515,515A,515F) and approved by the commissioner.

**37.24(3) MMA requirements to be filed with state of issue.** An issuer shall file any riders or amendments to SMSBP policy or certificate forms to delete outpatient prescription drug benefits as required by the MMA only with the commissioner in the state in which the policy or certificate was issued.

**37.24(4) Rate filing and approval required.** An issuer shall not use or change premium rates for a Medicare supplement policy or certificate unless the rates, rating schedule and supporting documentation have been filed with and approved by the commissioner in accordance with the filing requirements and procedures prescribed by the commissioner.

**37.24(5) One form per type.**

*a.* Except as provided in paragraph 37.24(5)“*b*,” an issuer shall not file for approval more than one form of a policy or certificate of each type for each SMSBP.

*b.* An issuer may offer, with the approval of the commissioner, up to four additional policy forms or certificate forms of the same type for the same SMSBP, one for each of the following cases:

- (1) The inclusion of new or innovative benefits;
- (2) The addition of either direct response or producer marketing methods;
- (3) The addition of either guaranteed issue or underwritten coverage;
- (4) The offering of coverage to individuals eligible for Medicare by reason of disability.

**37.24(6) Forms to be kept available once approved.**

*a.* Except as provided in subparagraph 37.24(6)“*a*”(1), an issuer shall continue to make available for purchase any SMSBP policy form or certificate form issued after January 1, 1992, that has been approved by the commissioner. An SMSBP policy form or certificate form shall not be considered to be available for purchase unless the issuer has actively offered it for sale in the previous 12 months.

(1) An issuer may discontinue the availability of an SMSBP policy form or certificate form if the issuer provides to the commissioner in writing its decision at least 30 days prior to discontinuing the availability of the form of the SMSBP policy or certificate. After receipt of the notice by the commissioner, the issuer shall no longer offer for sale the SMSBP policy form or certificate form in this state.

(2) An issuer that discontinues the availability of an SMSBP policy form or certificate form pursuant to subparagraph 37.24(6)“*a*”(1) shall not file for approval of a new SMSBP policy form or certificate form of the same type for the same SMSBP as the discontinued form for a period of five years after the issuer provides notice to the commissioner of the discontinuance. The period of discontinuance may be reduced if the commissioner determines that a shorter period is appropriate.

*b.* The sale or other transfer of Medicare supplement business to another issuer shall be considered a discontinuance for the purposes of this subrule.

*c.* A change in the rating structure or methodology shall be considered a discontinuance under paragraph 37.24(6)“*a*” unless the issuer complies with the following requirements:

(1) The issuer provides an actuarial memorandum, in a form and manner prescribed by the commissioner, describing the manner in which the revised rating methodology and resultant rates differ from the existing rating methodology and resultant rates.

(2) The issuer does not subsequently put into effect a change of rates or rating factors that would cause the percentage differential between the discontinued and subsequent rates as described in the actuarial memorandum to change. The commissioner may approve a change to the differential which is in the public interest.

**37.24(7) Experience under forms of same type to be combined for calculations.**

*a.* Except as provided in paragraph 37.24(7)“*b*,” the experience under all SMSBP policy forms or certificate forms of the same type in an SMSBP shall be combined for purposes of the refund or credit calculation prescribed in rule 191—37.23(514D).

*b.* Forms assumed under an assumption reinsurance agreement shall not be combined with the experience of other policy or certificate forms for purposes of the refund or credit calculation.  
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